ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO	DATE
FEE DETERMINATION	HC		10-3-01
O.I.P.E. CLASSIFIER			10/15/01
FORMALITY REVIEW	ta	720 49	11-25-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected		N	.... Non-elected
=	.... Allowed		I	.... Interference
—	(Through numeral)... Canceled		A	.... Appeal
÷	.... Restricted		O	.... Objected

Claim	Date		Claim	Date		Claim	Date
Final	Original		Final	Original		Final	Original
1			51			101	
2			52			102	
3			53			103	
4			54			104	
5			55			105	
6			56			106	
7			57			107	
8			58			108	
9			59			109	
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11			61			111	
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46			96			146	
47			97			147	
48			98			148	
49			99			149	
50			100			150	

If more than 150 claims or 10 actions
staple additional sheet her

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